

San Francisco Med. Soc.

CONSTITUTION, BY-LAWS,
OFFICERS, STANDING COMMITTEES AND MEMBERS

OF THE

SAN FRANCISCO

MEDICAL SOCIETY,

ALSO, THE

CODE OF MEDICAL ETHICS

ADOPTED BY THE SOCIETY,

AND THE

INAUGURAL ADDRESS OF THE PRESIDENT.

SURGEON GENERAL'S OFFICE

JUL 11 1880

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SAN FRANCISCO:

EDWARD BOSQUI & CO., PRINTERS, 517-CLAY STREET.

1868.

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SAN FRANCISCO

MEDICAL SOCIETY,

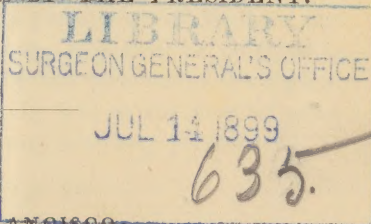
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CONSTITUTION.

ARTICLE I.

THIS Association shall be called the "SAN FRANCISCO MEDICAL SOCIETY."

ARTICLE II.

The objects of the Society shall be :

First. The cultivation and advancement of the science, by united exertions for mutual improvement, and contributions to Medical Literature.

Second. The promotion of the character, interests, and honor of the fraternity, by maintaining the union and harmony of the regular profession of the city and its vicinity, and aiming to elevate the standard of Medical Education.

Third. The separation of Regular from Irregular Practitioners.

Fourth. The association of the Profession proper for purposes of mutual recognition and fellowship.

ARTICLE III.

The Members shall be regular practitioners of Medicine and Surgery in the city or its vicinity ; they shall be proposed in writing at a regular meeting, by two members of the Society, and may be elected by a majority vote at any meeting subsequent to the one at which they may have been proposed.

ARTICLE IV.

No proprietor or vendor of any patent or secret remedy or medicine, nor any empirical or irregular practitioner shall either be admitted to, or retained in, the membership of this Society.

ARTICLE V.

The officers of this Society shall be, a President, two Vice-Presidents, a Recording Secretary, a Corresponding Secretary, a Treasurer, and a Librarian ; all of whom shall be elected annually by ballot and a majority vote, at the first regular meeting in January.

No member shall be eligible to the office of President for two successive terms.

ARTICLE VI.

The following Standing Committees shall be annually elected by ballot and a plurality vote, and they shall severally perform such duties as may be assigned to them by the By-laws.

First. A Committee on Admissions.

Second. A Committee on Medical Ethics.

Third. A Committee on Finance.

Fourth. A Committee on Publication.

Fifth. An Executive Committee.

ARTICLE VII.

The Society hereby reserves the right of punishing violations of its regulations, with the concurrent vote of three-fourths of the members present at a regular meeting, by reprimand, suspension, dismissal, or expulsion ; and no member who shall have been expelled shall be again proposed for admission, nor shall he be recognized by the Society as a regular practitioner of medicine.

Any member who shall have removed permanently from this city or its immediate vicinity, shall be considered as having vacated his membership, and his certificate at any time afterward may be recalled for cause.

ARTICLE VIII.

No part of this Constitution shall be altered, except at a regular meeting subsequent to one at which a proposition to that effect shall have been made in writing ; and then only by a vote of two-thirds of the members in attendance at a meeting at which not less than twenty are present.

BY - LAWS .

ARTICLE 1. The stated meetings shall be held on the second and fourth Tuesdays of every month, at half past seven o'clock P. M.

The election of Officers shall take place at the first stated meeting in January. At the first stated meeting in November of every year, an oration will be delivered.

Special meetings may be called at any time by the President, on the written request of five members.

Ten members shall be a quorum.

ART. 2. The President, or in his absence one of the Vice-Presidents, shall preside at the meetings, and enforce the rules of order, appoint all committees not otherwise provided for, give the casting vote in case of a tie, and perform such other duties as his position requires.

ART. 3. The Recording Secretary shall keep the minutes, notify absentees of their appointment, furnish the Committee on Admissions with a list of candidates for membership, and the chairman of every committee that may be elected or appointed with a list of its members, receive the signatures and initiation fees of new members, pay to the Treasurer all moneys received by him and take a receipt therefor, and perform such other duties as may be required by the Society.

ART. 4. The Treasurer shall receive and have charge of the moneys of the Society, and pay all bills approved by the Finance Committee. He shall report at the first stated meeting in every month the condition of the Treasury, and shall make a full report annually, at the last stated meeting in December. He shall furnish to the Recording Secretary, immediately before the

annual election, a list of all the members who have paid their dues and are entitled to vote. His books shall be open at all times to the inspection of the Finance Committee, and he shall deliver up to his successor in office, or any other authorized person, all property of the Society in his possession.

ART. 5. The Librarian shall have charge of all books, manuscripts, specimens, and other scientific property, and keep a complete catalogue thereof. He shall make an annual report at the last stated meeting in December.

ART. 6. The Committee on Admissions and on Ethics shall consist each of five members ; that on Finance and on Publication, and the Executive Committee, of three each. The member receiving the highest number of votes, or first named, on any committee, shall be its chairman, unless the Committee shall otherwise elect.

ART. 7. The Committee on Admissions shall inquire into the qualifications of all candidates for membership, and report the names of those who are found admissible. Should they fail to make a report on any application within one month, any member may require a vote of the Society thereon ; but in this case the affirmative vote of four-fifths of the members present shall be necessary to elect. In their reports on candidates, the committee shall state the source from which the individual has derived his authority to practice medicine and surgery, with the date thereof, to be entered on the record of the Secretary.

ART. 8. The Committee on Finance shall inspect and audit all bills, provide means for collecting the dues and superintend generally the financial affairs of the Society. They shall make a full and detailed report at the last stated meeting in December.

ART. 9. The Committee on Publication shall superintend such printing as the Society may direct. They shall also prepare and preserve in a book provided for the purpose, a general outline of all the discussions on scientific topics.

ART. 10. The Executive Committee shall assist the officers in protecting the property of the Society ; provide a suitable place for the meetings, propose subjects for discussion when called on, recommend plans for promoting the objects of the society, and

in all things superintend its general interests. They shall make an annual report at the last stated meeting in December.

ART. 11. All charges against members shall first be made in private to the Committee on Ethics, who shall, if possible, determine them amicably. If the Committee should not succeed in so doing, or if, on investigation, they should deem further action necessary, they shall report the case to the Society, with their decision or recommendation.

ART. 12. At the annual election for officers, the Secretary shall call the roll of members who have paid their dues, each of whom, as his name is called, shall deposit his ballot. None others shall be entitled to vote.

ART. 13. The Initiation Fee shall be two dollars, to be paid on signing the Constitution. The payments afterwards shall be at the rate of one dollar per month, payable quarterly in advance, at the beginning of January, April, July, and October. Any member in arrears over one year, shall be suspended from the privileges of membership, and may be expelled, after due notice, at the option of the Society. The Treasurer shall furnish in his annual report, a list of all those who are more than one year in arrears.

If a member be absent from the city for three months or longer, he shall be released from the payment of dues during his absence.

ART. 14. At the annual meeting, the retiring President shall appoint an Orator, to deliver an address at the first stated meeting in November.

ART. 15. Order of Business :

1. Calling the Roll of Members.
2. Reading of Minutes of last Meeting.
3. Report of Committee on Admissions.
4. Election of new Members.
5. Propositions for Membership.
6. Reports of Committees and Officers.
7. Written Communications and Discussions thereon.
8. Verbal Communications on stated Discussions.
9. Unfinished Business.
10. New Business.
11. Adjournment.

All questions of parliamentary order shall be determined by Cushing's Manual.

ART. 16. These By-laws may be suspended by a three-fourth vote at a regular meeting ; and they may be altered or amended by a similar vote, provided notice of the same have been given in writing at a previous stated meeting.

LIST OF OFFICERS.

PRESIDENT.

J. P. WHITNEY, M.D.

VICE-PRESIDENTS.

S. R. HARRIS, M.D.

J. B. PIGNÉ-DUPUYTREN, M.D.

RECORDING SECRETARY.

HENRY GIBBONS, JR., M.D.

CORRESPONDING SECRETARY.

THOMAS M. LOGAN, M.D.

TREASURER.

A. G. SOULE, M.D.

LIBRARIAN.

WILLIAM T. GARWOOD, M.D.

STANDING COMMITTEES.

COMMITTEE ON ADMISSIONS.

JOSEPH HAINE, M.D., THOMAS BENNETT, M.D.,
HENRY GIBBONS, M.D., W. P. TILDEN, M.D.,
G. HEWSTON, M.D.

COMMITTEE ON MEDICAL ETHICS.

THOMAS M. LOGAN, M.D., J. F. MORSE, M.D.,
W. P. TILDEN, M.D., W. A. GROVER, M.D.,
J. S. ADAMS, M.D.

COMMITTEE ON FINANCE.

W. L. TWICHELL, M.D., EDWARD FARRAR, M.D.,
J. D. WHITNEY, M.D.

COMMITTEE ON PUBLICATION.

A. B. STOUT, M.D., E. D'OLIVEIRA, M.D.,
THOMAS M. LOGAN, M.D.

EXECUTIVE COMMITTEE.

J. P. WHITNEY, M.D., C. B. HOLBROOK, M.D.,
J. R. PREVOST, M.D.

LIST OF MEMBERS.

ADAMS, JOHN S.	LOGAN, THOMAS M.
BALDWIN, A. S.	MALECH, G. H.
BALDWIN, H. S.	MORSE, JOHN F.
BENNETT, THOMAS	MURPHY, JAMES
BIRD, NELSON J.	O'NEIL, A. A.
BRADBURY, W. T.	PIGNÉ-DUPUYTREN, J. B.
BURGESS, O. O.	PREVOST, J. R.
BURRILL, CHARLES	REGENSBURGER, J.
D'OLIVEIRA, E.	RICE, J. R.
EIDENMULLER, GEORGE	ROTTANZI, A.
FARRAR, EDWARD	ROWELL, CHARLES
GIBBONS, HENRY	ROWELL, ISAAC
GIBBONS, HENRY, JR.	SOULE, A. G.
GROVER, W. A.	STOUT, ARTHUR B.
HAINE, JOSEPH	TIBBITTS, S. M.
HANSOME, THOMAS	TILDEN, W. P.
HARRIS, S. R.	TOLAND, H. H.
HARVILLE, J. W.	TWICHELL, W. L.
HOLBROOK, C. B.	WHITNEY, J. P.
HUNT, HARVEY	WHITNEY, JAMES D.

CODE OF MEDICAL ETHICS.

[The following Code of Medical Ethics, as recommended by the American Medical Association, has been approved and adopted by the Society.]

OF THE DUTIES OF PHYSICIANS TO THEIR PATIENTS, AND OF THE OBLIGATIONS OF PATIENTS TO THEIR PHYSICIANS.

ARTICLE I.—*Duties of Physicians to their Patients.*

§ 1. A physician should not only be ever ready to obey the calls of the sick, but his mind ought also to be imbued with the greatness of his mission, and the responsibility he habitually incurs in its discharge. These obligations are the more deep and enduring, because there is no tribunal, other than his own conscience, to adjudge penalties for carelessness or neglect. Physicians should, therefore, minister to the sick with due impressions of the importance of their office, reflecting that the ease, the health, and the lives of those committed to their charge, depend on their skill, attention, and fidelity. They should study, also, in their deportment, so to unite *tenderness* with *firmness*, and *condescension* with *authority*, as to inspire the minds of their patients with gratitude, respect, and confidence.

§ 2. Every case committed to the charge of a physician should be treated with attention, steadiness, and humanity. Reasonable indulgence should be granted to the mental imbecility and caprices of the sick. Secresy and delicacy, when required by peculiar circumstances, should be strictly observed; and the familiar and confidential intercourse to which physicians are admitted in their professional visits, should be used with discretion, and with the most scrupulous regard to fidelity and honor. The obligation of secresy extends beyond the period of professional services; none of the privacies of domestic life, no infirmities or flaw of character observed during professional attendance, should ever be divulged by the physician, except when he is imperatively required to do so. The force and necessity of this obligation are indeed so great, that profes-

sional men have, under certain circumstances, been protected in their observance of secrecy by courts of justice.

§ 3. Frequent visits to the sick are in general requisite, since they enable the physician to arrive at a more perfect knowledge of the disease—to meet promptly every change which may occur, and also tend to preserve the confidence of the patient. But unnecessary visits are to be avoided, as they give useless anxiety to the patient, tend to diminish the authority of the physician, and render him liable to be suspected of interested motives.

§ 4. A physician should not be forward to make gloomy prognostications, because they savor of empiricism, by magnifying the importance of his services in the treatment or cure of the disease. But he should not fail, on proper occasions, to give to the friends of the patient timely notice of danger when it really occurs; and even to the patient himself, if absolutely necessary. This office, however, is so peculiarly alarming when executed by him, that it ought to be declined whenever it can be assigned to any other person of sufficient judgment and delicacy. For, the physician should be the minister of hope and comfort to the sick; that, by such cordials to the drooping spirit, he may soothe the bed of death, revive expiring life, and counteract the depressing influence of those maladies which often disturb the tranquility of the most resigned in their last moments. The life of a sick person can be shortened not only by the acts, but also by the words or the manner of a physician. It is, therefore, a sacred duty to guard himself carefully in this respect, and to avoid all things which have a tendency to discourage the patient and to depress his spirits.

§ 5. A physician ought not to abandon a patient because the case is deemed incurable; for his attendance may continue to be highly useful to the patient, and comforting to the relatives around him, even in the last period of a fatal malady, by alleviating pain and other symptoms, and by soothing mental anguish. To decline attendance, under such circumstances, would be sacrificing to fanciful delicacy and mistaken liberality, that moral duty, which is independent of and far superior to, all pecuniary consideration.

§ 6. Consultations should be promoted in difficult or protracted cases, as they give rise to confidence, energy, and more enlarged views in practice.

§ 7. The opportunity which a physician not unfrequently enjoys of promoting and strengthening the good resolutions of his patients, suffering under the consequences of vicious conduct, ought never to be neglected. His counsels, or even remonstrances, will give satisfaction, not offence, if they be proffered with politeness and evince a genuine love of virtue, accompanied by a sincere interest in the welfare of the person to whom they are addressed.

ARTICLE II.—*Obligations of Patients to their Physicians.*

§ 1. The members of the medical profession, upon whom is enjoined the performance of so many important and arduous duties towards the community, and who are required to make so many sacrifices of comfort, ease, and health,

for the welfare of those who avail themselves of their services, certainly have a right to expect and require, that their patients should entertain a just sense of the duties which they owe to their medical attendants.

§ 2. The first duty of a patient is, to select as his medical adviser one who has received a regular professional education. In no trade or occupation, do mankind rely on the skill of an untaught artist; and in medicine, confessedly the most difficult and intricate of the sciences, the world ought not to suppose that knowledge is intuitive.

§ 3. Patients should prefer a physician whose habits of life are regular, and who is not devoted to company, pleasure, or to any pursuit incompatible with his professional obligations. A patient should, also, confide the care of himself and family, as much as possible, to one physician; for a medical man who has become acquainted with the peculiarities of constitution, habits, and predispositions, of those he attends, is more likely to be successful in his treatment than one who does not possess that knowledge.

A patient who has thus selected his physician, should always apply for advice in what may appear to him trivial cases, for the most fatal results often supervene on the slightest accidents. It is of still more importance that he should apply for assistance in the forming stage of violent diseases; it is to a neglect of this precept that medicine owes much of the uncertainty and imperfection with which it has been reproached.

§ 4. Patients should faithfully and unreservedly communicate to their physician the supposed cause of their disease. This is the more important, as many diseases of a mental origin simulate those depending on external causes, and yet are only to be cured by ministering to the mind diseased. A patient should never be afraid of thus making his physician his friend and adviser; he should always bear in mind that a medical man is under the strongest obligations of secrecy. Even the female sex should never allow feelings of shame or delicacy to prevent their disclosing the seat, symptoms, and causes of complaints peculiar to them. However commendable a modest reserve may be in the common occurrences of life, its strict observance in medicine is often attended with the most serious consequences, and a patient may sink under a painful and loathsome disease, which might have been readily prevented had timely intimation been given to the physician.

§ 5. A patient should never weary his physician with a tedious detail of events or matters not appertaining to his disease. Even as relates to his actual symptoms, he will convey much more real information by giving clear answers to interrogatories, than by the most minute account of his own framing. Neither should he obtrude upon his physician the details of his business, nor the history of his family concerns.

§ 6. The obedience of a patient to the prescriptions of his physician should be prompt and implicit. He should never permit his own crude opinions as to their fitness, to influence his attention to them. A failure in one particular may render an otherwise judicious treatment dangerous, and even fatal. This remark

is equally applicable to diet, drink, and exercise. As patients become convalescent, they are very apt to suppose that the rules prescribed for them may be disregarded, and the consequence, but too often, is a relapse. Patients should never allow themselves to be persuaded to take any medicine whatever, that may be recommended to them by the self-constituted doctors and doctresses, who are so frequently met with, and who pretend to possess infallible remedies for the cure of every disease. However simple some of their prescriptions may appear to be, it often happens that they are productive of much mischief, and in all cases they are injurious, by contravening the plan of treatment adopted by the physician.

§ 7. A patient should, if possible, avoid even the *friendly visits of a physician* who is not attending him—and when he does receive them, he should never converse on the subject of his disease, as an observation may be made, without any intention of interference, which may destroy his confidence in the course he is pursuing, and induce him to neglect the directions prescribed to him. A patient should never send for a consulting physician without the express consent of his own medical attendant. It is of great importance that physicians should act in concert; for although their modes of treatment may be attended with equal success when employed singly, yet conjointly they are very likely to be productive of disastrous results.

§ 8. When a patient wishes to dismiss his physician, justice and common courtesy require that he should declare his reasons for so doing.

§ 9. Patients should always, when practicable, send for their physician in the morning, before his usual hour of going out; for, by being early aware of the visits he has to pay during the day, the physician is able to apportion his time in such a manner as to prevent an interference of engagements. Patients should also avoid calling on their medical adviser unnecessarily during the hours devoted to meals or sleep. They should always be in readiness to receive the visits of their physician, as the detention of a few minutes is often of serious inconvenience to him.

§ 10. A patient should, after his recovery, entertain a just and enduring sense of the value of the services rendered him by his physician; for these are of such a character, that no mere pecuniary acknowledgment can repay or cancel them.

OF THE DUTIES OF PHYSICIANS TO EACH OTHER, AND TO THE PROFESSION AT LARGE.

ARTICLE I.—*Duties for the Support of Professional Character.*

§ 1. Every individual on entering the profession, as he becomes thereby entitled to all its privileges and immunities, incurs an obligation to exert his best abilities to maintain its dignity and honor, to exalt its standing, and to extend the bounds of its usefulness. He should, therefore, observe strictly, such laws as are instituted for the government of its members:—should avoid all contumelious

and sarcastic remarks relative to the faculty, as a body; and while, by unwearied diligence, he resorts to every honorable means of enriching the science, he should entertain a due respect for his seniors, who have, by their labors, brought it to the elevated condition in which he finds it.

§ 2. There is no profession, from the members of which, greater purity of character, and a higher standard of moral excellence are required, than the medical; and to attain such eminence, is a duty every physician owes alike to his profession and to his patients. It is due to the latter, as without it he cannot command their respect and confidence; and to both, because no scientific attainments can compensate for the want of correct moral principles. It is also incumbent upon the faculty to be temperate in all things, for the practice of physic requires the unremitting exercise of a clear and vigorous understanding; and, on emergencies, for which no professional man should be unprepared, a steady hand, an acute eye, and an unclouded head may be essential to the well-being, and even to the life, of a fellow creature.

§ 3. It is derogatory to the dignity of the profession to resort to public advertisements, or private cards, or handbills, inviting the attention of individuals affected with particular diseases—publicly offering advice and medicine to the poor gratis, or promising radical cures; or to publish cases and operations in the daily prints, or suffer such publications to be made; to invite laymen to be present at operations, to boast of cures and remedies, to adduce certificates of skill and success, or to perform any similar acts. These are the ordinary practices of empirics, and are highly reprehensible in a regular physician.

§ 4. Equally derogatory to professional character is it, for a physician to hold a patent for any surgical instrument or medicine; or to dispense a secret *nostrum*, whether it be the composition or exclusive property of himself or of others. For, if such a *nostrum* be of real efficacy, any concealment regarding it is inconsistent with beneficence and professional liberality; and if mystery alone give it value and importance, such craft implies either disgraceful ignorance or fraudulent avarice. It is also reprehensible for physicians to give certificates attesting the efficacy of patent or secret medicines, or in any way to promote the use of them.

ARTICLE II.—*Professional Services of Physicians to each Other.*

§ 1. All practitioners of medicine, their wives, and their children while under the paternal care, are entitled to the gratuitous services of any one or more of the faculty residing near them, whose assistance may be desired. A physician afflicted with disease is usually an incompetent judge of his own case; and the natural anxiety and solicitude which he experiences at the sickness of a wife, a child, or any one who, by the ties of consanguinity, is rendered peculiarly dear to him, tend to obscure his judgment, and produce timidity and irresolution in his practice. Under such circumstances, medical men are peculiarly dependent upon each other, and kind offices and professional aid should always be cheerfully and gratuitously afforded. Visits ought not, however, to be obtruded offi-

ciously ; as such unasked civility may give rise to embarrassment, or interfere with that choice on which confidence depends. But, if a distant member of the faculty, whose circumstances are affluent, request attendance, and an honorarium be offered, it should not be declined ; for no pecuniary obligation ought to be imposed, which the party receiving it would not wish to incur.

ARTICLE III.—*Of the Duties of Physicians as respects Vicarious Offices.*

§ 1. The affairs of life, the pursuit of health, and the various accidents and contingencies to which a medical man is peculiarly exposed, sometimes require him temporarily to withdraw from his duties to his patients, and to request some of his professional brethren to officiate for him. Compliance with this request is an act of courtesy, which should always be performed with the utmost consideration for the interest and character of the family physician, and when exercised for a short period, all the pecuniary obligations for such service should be awarded to him. But if a member of the profession neglect his business in quest of pleasure and amusement, he cannot be considered as entitled to the advantages of the frequent and long-continued exercise of this fraternal courtesy, without awarding to the physician who officiates the fees arising from the discharge of his professional duties.

In obstetrical and important surgical cases, which give rise to unusual fatigue, anxiety, and responsibility, it is just that the fees accruing therefrom should be awarded to the physician who officiates.

ARTICLE IV.—*Of the Duties of Physicians in regard to Consultations.*

§ 1. A regular medical education furnishes the only presumptive evidence of professional abilities and acquirements, and ought to be the only acknowledged right of an individual to the exercise and honors of his profession. Nevertheless, as in consultations the good of the patient is the sole object in view, and this is often dependent on personal confidence, no intelligent regular practitioner, who has a license to practice from some medical board of known and acknowledged respectability, recognised by the American Medical Association, and who is in good moral and professional standing in the place in which he resides, should be fastidiously excluded from fellowship, or his aid refused in consultation, when it is requested by the patient. But no one can be considered as a regular practitioner, or a fit associate in consultation, whose practice is based on an exclusive dogma, to the rejection of the accumulated experience of the profession, and of the aids actually furnished by anatomy, physiology, pathology, and organic chemistry.

§ 2. In consultations, no rivalry or jealousy should be indulged ; candor, probity, and all due respect should be exercised towards the physician having charge of the case.

§ 3. In consultations, the attending physician should be the first to propose the necessary questions to the sick ; after which the consulting physician should

have the opportunity to make such further inquiries of the patient as may be necessary to satisfy him of the true character of the case. Both physicians should then retire to a private place for deliberation; and the one first in attendance should communicate the directions agreed upon to the patient or his friends, as well as any opinions which it may be thought proper to express. But no statement or discussion of it should take place before the patient or his friends, except in the presence of all the faculty attending, and by their common consent; and no *opinions* or *prognostications* should be delivered, which are not the result of previous deliberation and concurrence.

§ 4. In consultations, the physician in attendance should deliver his opinion first; and when there are several consulting, they should deliver their opinions in the order in which they have been called in. No decision, however, should restrain the attending physician from making such variations in the mode of treatment, as any subsequent unexpected change in the character of the case may demand. But such variations, and the reasons for it, ought to be carefully detailed at the next meeting in consultation. The same privilege belongs also to the consulting physician, if he is sent for in an emergency, when the regular attendant is out of the way, and similar explanations must be made by him at the next consultation.

§ 5. The utmost punctuality should be observed in the visits of physicians when they are to hold consultation together, and this is generally practicable, for society has been considerate enough to allow the plea of a professional engagement to take precedence of all others, and to be an ample reason for the relinquishment of any present occupation. But, as professional engagements may sometimes interfere, and delay one of the parties, the physician who first arrives should wait for his associate a reasonable period, after which the consultation should be considered as postponed to a new appointment. If it be the attending physician who is present, he will, of course, see the patient and prescribe; but if it be the consulting one, he should retire, except in case of emergency, or when he has been called from a considerable distance, in which latter case he may examine the patient, and give his opinion in *writing* and *under seal*, to be delivered to his associate.

§ 6. In consultations, theoretical discussions should be avoided, as occasioning perplexity and loss of time. For there may be much diversity of opinion concerning speculative points, with perfect agreement in those modes of practice which are founded, not on hypothesis, but on experience and observation.

§ 7. All discussions in consultation should be held as secret and confidential. Neither by words nor manner should any of the parties to a consultation assert or insinuate, that any part of the treatment pursued did not receive his assent. The responsibility must be equally divided between the medical attendants—they must equally share the credit of success, as well as the blame of failure.

§ 8. Should an irreconcilable diversity of opinion occur when several physicians are called upon to consult together, the opinion of the majority should be considered as decisive; but if the numbers be equal on each side, then the de-

cision should rest with the attending physician. It may, moreover, sometimes happen that two physicians cannot agree in their views of the nature of a case, and the treatment to be pursued. This is a circumstance much to be deplored, and should always be avoided, if possible, by mutual concessions, as far as they can be justified by a conscientious regard for the dictates of judgment. But in the event of its occurrence, a third physician should, if practicable, be called to act as umpire; and, if circumstances prevent the adoption of this course, it must be left to the patient to select the physician in whom he is most willing to confide. But, as every physician relies upon the rectitude of his judgment, he should, when left in the minority, politely and consistently retire from any further deliberation in the consultation, or participation in the management of the case.

§ 9. As circumstances sometimes occur to render a *special consultation* desirable, when the continued attendance of two physicians might be objectionable to the patient, the member of the faculty whose assistance is required in such cases, should sedulously guard against all future unsolicited attendance. As such consultations require an extraordinary portion both of time and attention, at least a double honorarium may be reasonably expected.

§ 10. A physician who is called upon to consult, should observe the most honorable and scrupulous regard for the character and standing of the practitioner in attendance; the practice of the latter, if necessary, should be justified, as far as it can be, consistently with a conscientious regard for truth, and no hint or insinuation should be thrown out which could impair the confidence reposed in him, or affect his reputation. The consulting physician should also carefully refrain from any of those extraordinary attentions or assiduities, which are too often practised by the dishonest for the base purpose of gaining applause, or ingratiating themselves into the favor of families and individuals.

ARTICLE V.—*Duties of Physicians in cases of Interference.*

§ 1. Medicine is a liberal profession, and those admitted into its ranks should found their expectations of practice upon the extent of their qualifications, not on intrigue or artifice.

§ 2. A physician in his intercourse with a patient under the care of another practitioner, should observe the strictest caution and reserve. No meddling inquiries should be made—no disingenuous hints given relative to the nature and treatment of his disorder; nor any course of conduct pursued that may, directly or indirectly, tend to diminish the trust reposed in the physician employed.

§ 3. The same circumspection and reserve should be observed when, from motives of business or friendship, a physician is prompted to visit an individual who is under the direction of another practitioner. Indeed, such visits should be avoided, except under peculiar circumstances; and when they are made, no particular inquiries should be instituted relative to the nature of the disease, or the remedies employed, but the topics of conversation should be as foreign to the case as circumstances will admit.

§ 4. A physician ought not to take charge of or prescribe for a patient who has recently been under the care of another member of the faculty in the same illness, except in cases of sudden emergency, or in consultation with the physician previously in attendance, or when the latter has relinquished the case, or been regularly notified that his services are no longer desired. Under such circumstances, no unjust or illiberal insinuations should be thrown out in relation to the conduct or practice previously pursued, which should be justified as far as candor and regard for truth and probity will permit; for it often happens that patients become dissatisfied when they do not experience immediate relief, and, as many diseases are naturally protracted, the want of success, in the first stage of treatment, affords no evidence of a lack of professional knowledge and skill.

§ 5. When a physician is called to an urgent case, because the family attendant is not at hand, he ought, unless his assistance in consultation be desired, to resign the care of the patient to the latter immediately on his arrival.

§ 6. It often happens, in cases of sudden illness or of recent accidents and injuries, owing to the alarm and anxiety of friends, that a number of physicians are simultaneously sent for. Under these circumstances, courtesy should assign the patient to the first who arrives, who should select from those present any additional assistance that he may deem necessary. In all such cases, however, the practitioner who officiates should request the family physician, if there be one, to be called, and, unless his further attendance be requested, should resign the case to the latter on his arrival.

§ 7. When a physician is called to the patient of another practitioner, in consequence of the sickness or absence of the latter, he ought, on the return or recovery of the regular attendant, and with the consent of the patient, to surrender the case.

[The expression, "Patient of another Practitioner," is understood to mean a patient who may have been under the charge of another practitioner at the time of the attack of sickness, or departure from home of the latter, or who may have called for his attendance during his absence or sickness, or in any manner given it to be understood that he regarded the said physician as his regular medical attendant.]

§ 8. A physician, when visiting a sick person in the country, may be desired to see a neighboring patient who is under the regular direction of another physician, in consequence of some sudden change or aggravation of symptoms. The conduct to be pursued on such an occasion is to give advice adapted to present circumstances; to interfere no further than is absolutely necessary with the general plan of treatment; to assume no future direction, unless it be expressly desired; and, in this last case, to request an immediate consultation with the practitioner previously employed.

§ 9. A wealthy physician should not give advice *gratis* to the affluent; because his doing so is an injury to his professional brethren. The office of a physician can never be supported as an exclusively beneficent one; and it is defrauding, in some degree, the common funds for its support, when fees are dispensed with which might justly be claimed.

§ 10. When a physician who has been engaged to attend a case of midwifery is absent, and another is sent for, if delivery is accomplished during the attendance of the latter, he is entitled to the fee, but should resign the patient to the practitioner first engaged.

ARTICLE VI.—*Of Differences between Physicians.*

§ 1. Diversity of opinion and opposition of interest, may, in the medical as in other professions, sometimes occasion controversy and even contention. Whenever such cases unfortunately occur, and cannot be immediately terminated, they should be referred to the arbitration of a sufficient number of physicians, or a *court-medical*.

§ 2. As a peculiar reserve must be maintained by physicians towards the public, in regard to professional matters, and as there exist numerous points in medical ethics and etiquette through which the feelings of medical men may be painfully assailed in their intercourse with each other, and which cannot be understood or appreciated by general society, neither the subject-matter of such differences, nor the adjudication of the arbitrators should be made public, as publicity in a case of this nature may be personally injurious to the individuals concerned, and can hardly fail to bring discredit on the faculty.

ARTICLE VII.—*Of Pecuniary Acknowledgments.*

Some general rules should be adopted by the faculty, in every town or district, relative to *pecuniary acknowledgments* from their patients; and it should be deemed a point of honor to adhere to these rules with as much uniformity as varying circumstances will admit.

OF THE DUTIES OF THE PROFESSION TO THE PUBLIC, AND OF THE OBLIGATIONS OF THE PUBLIC TO THE PROFESSION.

ARTICLE I.—*Duties of the Profession to the Public.*

§ 1. As good citizens, it is the duty of physicians to be ever vigilant for the welfare of the community, and to bear their part in sustaining its institutions and burdens; they should also be ever ready to give counsel to the public in relation to matters especially appertaining to their profession, as on subjects of medical police, public hygiene, and legal medicine. It is their province to enlighten the public in regard to quarantine regulations—the location, arrangement, and dietaries of hospitals, asylums, schools, prisons, and similar institutions—in relation to the medical police of towns, as drainage, ventilation, etc.—and in regard to measures for the prevention of epidemic and contagious diseases; and when pestilence prevails, it is their duty to face the danger, and to continue their labors for the alleviation of the suffering, even at the jeopardy of their own lives.

§ 2. Medical men should also be always ready, when called on by the legally

constituted authorities, to enlighten coroners' inquests, and courts of justice, on subjects strictly medical—such as involve questions relating to sanity, legitimacy, murder by poison or other violent means, and in regard to the various other subjects embraced in the science of Medical Jurisprudence. But in these cases, and especially where they are required to make a *post-mortem* examination, it is just, in consequence of the time, labor, and skill required, and the responsibility and risk they incur, that the public should award them a proper honorarium.

§ 3. There is no profession, by the members of which eleemosynary services are more liberally dispensed than the medical, but justice requires that some limits should be placed to the performance of such good offices. Poverty, professional brotherhood, and certain of the public duties referred to in the first section of this article, should always be recognised as presenting valid claims for gratuitous services; but neither institutions endowed by the public or by rich individuals, societies for mutual benefit, for the insurance of lives or for analogous purposes, nor any profession or occupation, can be admitted to possess such privilege. Nor can it be justly expected of physicians to furnish certificates of inability to serve on juries, to perform militia duty, or to testify to the state of health of persons wishing to insure their lives, obtain pensions, or the like, without a pecuniary acknowledgment. But to individuals in indigent circumstances, such professional services should always be cheerfully and freely accorded.

§ 4. It is the duty of physicians, who are frequent witnesses of the enormities committed by quackery, and the injury to health and even destruction of life caused by the use of quack medicines, to enlighten the public on these subjects, to expose the injuries sustained by the unwary from the devices and pretensions of artful empirics and impostors. Physicians ought to use all the influence which they may possess, as professors in Colleges of Pharmacy, and by exercising their option in regard to the shops to which their prescriptions shall be sent, to discourage druggists and apothecaries from vending quack or secret medicines, or from being in any way engaged in their manufacture and sale.

ARTICLE II.—*Obligations of the Public to Physicians.*

The benefits accruing to the public, directly and indirectly, from the active and unwearied beneficence of the profession, are so numerous and important, that physicians are justly entitled to the utmost consideration and respect from the community. The public ought likewise to entertain a just appreciation of medical qualifications; to make a proper discrimination between true science and the assumptions of ignorance and empiricism—to afford every encouragement and facility for the acquisition of medical education—and no longer to allow the statute-books to exhibit the anomaly of exacting knowledge from physicians, under a liability to heavy penalties, and of making them obnoxious to punishment for resorting to the only means of obtaining it.

INAUGURAL ADDRESS
TO THE
SAN FRANCISCO MEDICAL SOCIETY

BY
J. P. WHITNEY, M.D., PRESIDENT.

*Gentlemen of the Profession and Members
of the San Francisco Medical Society:*

WITH gratified pride I appear before you, in recognition of the honor conferred by your selection of me to preside over your meetings for the current year.

The inauguration of a Society like this is a peculiarly proper time for considering the nature of the relations which our noble profession sustains to the world and the responsibilities which as true members of the profession we have taken upon ourselves. With your kind indulgence, I will offer a few thoughts and suggestions which seem pertinent to the occasion, and state as concisely as possible the reasons which appeared to call for social co-operation among the regular members of the profession in San Francisco, as well as the objects we hope to accomplish.

More than two thousand years ago, a class of men, second to none in their time, devoted their energies to the acquisition of knowledge of the best means of promoting the health of mankind: to this end they carefully studied the influences which promote the most perfect evolution of the body and mind of the human being. The causes tending to deterioration, as well as the means which a wise Providence has placed within the reach of human sagacity for the restoration of lost health, or the mitigation of inevitable suffering. This class of observers has continued from Hippocrates to the present time—the fruits of their labor the world now enjoys: and in continuation of their labor of love to mankind, we profess to devote our lives. Let us prove ourselves worthy of this noble profession—that those who surround, and those who come after us, may see that we have not lived and labored in vain.

The search after knowledge is one of the most prominent characteristics of humanity; surrounded with ever-changing phenomena, the active mind seeks their causes that it may reduce their apparent complexity to system, their variety to law, thus to arrive at science by the aid of reason, tracing relationships among observed facts. Seneca says: “Philosophy is not exercised for show alone; it has a higher object than to divest idleness of its languor, by relieving the tedium of the long hours of the day: its purpose is rather to form and fashion the soul, giving to life its disposition and its order, pointing out what it is our duty to do,

what we may better omit. Her proper sphere is to sit at the helm, and in a sea of peril direct the course of those who are wandering through the waves."

Philosophy was infected by two prominent faults till the time of Bacon—a too loose observation of facts, and a too fanciful explanation of phenomena. Since Bacon's time a somewhat opposite tendency has been prominent—of too entire a reliance upon facts obtained by observation and experiment, to the disparagement of rational hypothesis or theory. Knowledge obtains and remembers facts; science reduces knowledge to system or method by the use of theory.

Sir William Hamilton says: "Knowledge does not necessarily imply education; the acquisition of a certain number of facts does not necessitate a corresponding amount of intellectual cultivation: to acquire facts is often easy; to so arrange them in the understanding that they may be available for subsequent useful application, is much more difficult."

Cowper recognizes the same distinction as between knowledge and wisdom.

"Knowledge and Wisdom far from being one,
Have oft-times no connection; Knowledge dwells
In heads replete with thoughts of other men,
Wisdom in minds attentive to their own.
Knowledge, a rude unprofitable mass—
The mere materials with which Wisdom builds—
Till smoothed and squared, and fitted to its place,
Often encumbers whom it seems to enrich."

Observation and reflection then should mutually

give and take lessons in the process of a philosophical education ; by so doing, they minister to real progress in knowledge and wisdom, in art and science. The collection of numerous facts may aid in the "art of healing." A wise generalization of the facts of recorded experience will contribute to the establishment of medical science.

The love of life and desire of health, the fear of disease and the dread of death, are so deeply rooted and grounded in the very nature of the human race, that the assertion of the wise man : "all that a man hath he will give for his life," finds its sanction in every truly sane mind, and compels diligent search for the best means within our reach for prolonging life, promoting health, relieving disease, and mitigating the horrors of the final agony.

To place thinking beings in the world of progress, is to necessitate the search after knowledge of the means of improvement both of the being and the world.

Were mankind guided by instinct instead of reason, civilization and refinement would be impossible ; encased in a coat of mail like the Saurian or the Pachyderm, or enveloped in the warm covering of the denizens of the forest, man would never have emerged from a state of barbarism. But with few natural guides or protective provisions, and little control over the contingencies of his being, except that acquired through the exercise of reason, he finds himself forced to cultivate the nobler nature by which he is rendered creation's lord.

“The Lord God formed man of the dust of the ground, and breathed into his nostrils the breath of Life, and man became a living Soul.”

Our aim is the acquisition of knowledge of the laws of health, disease, and remedy; to this end has every department of nature been laid under contribution for materials of which to build the temple of medical truth; to this end have millions of busy scalpels sought to rescue knowledge from the loathsome charnel-house before “darkness and the worm” should cover and destroy the textures they felt compelled to unravel; to this end are thousands of microscopes peering into the organized structures, that they may obtain a better insight of the steps by which life clothes itself with material form, or how the beautiful primitive crystals get their angles and their polish; to this end are hundreds of laboratories busied with analyses and syntheses that not only the elements and their proportions in every substance may be known; but even the forces which govern their compositions and decompositions ascertained; and to this end that far-reaching search for the clew to that thread by which the correlation, equivalence, and conservation of force may be unraveled from that which presides over the composition of air and water, to that which is exhibited as sense and reason; whilst observation and experiment, reason and reflection are to be patiently and perseveringly plied for collecting and arranging the materials for our temple of truth, that its foundations may be firm, and its superstructure en-

during, we need not forget that many of the great ones of the past, after all their laborious study, careful observation, patient experience, and sagacious generalizations which settled questions and demonstrated principles of incalculable advantage to the world, have proved that,

“He who ascends to mountain tops, shall find
The loftiest peaks most wrapt in clouds and snow ;
He who surpasses or subdues mankind,
Must look down on the hate of those below.
Though high above the sun of glory glow,
And far beneath the earth and ocean spread
Round him are icy rocks, and rudely blow
Contending tempests on his naked head ;
And thus reward the toils that to those summits led.”

Indeed medical history acquaints us with the fact that many of those whose names now shine as stars of the first magnitude in the bright galaxy of medical science, instead of the honorable distinctions which they should have received during their life-time, often received only exhibitions of base ingratitude, and not unfrequently of that still baser passion, “envy, that withers at another’s joy, and hates an excellence it cannot reach.” These considerations, however, will never dishearten the true votary of our science, but with mental vision fixed upon the bright halo of glory that shall for ever encircle the brow of the presiding genius of the temple of medical truth, as thus transfigured to the hopes of humanity and the admiration of the world, he shall reap a rich reward for the most earnest toil and thought which he can possibly bring to its study and investigation.

But medicine is not always studied as a science ; it is sometimes learned as a trade, and sometimes, unfortunately, its responsibilities are assumed without either study or apprenticeship.

In the pages of a late issue of the San Francisco Directory, are recorded the names of more than three hundred of our citizens with some prefix or suffix attached, signifying a pretension to a knowledge in medicine more profound than that professed by those to whose names the generic title "doctor" is not affixed. In order to analyze these pretensions, let us separate them into groups. Doctors may be classified as Hugh Murray has classed the verbs of our language, into regular, irregular, and defective ; by defining each group there will be no question as to where any individual practitioner would find place in the classification.

The regular, are those who have respected time-honored custom by devoting years to the study of medicine, and have submitted to such proper tests of their abilities, as a due regard for the common good, in every enlightened nation has rendered obligatory ; who in their deportment observe rules which wise men of the profession have embodied into a code for the guidance of all who "seek noble ends by noble means" ; who will not, in the maintenance of their own rights, willingly infringe the rights of others.

The irregular are such as having studied medicine, and perhaps graduated with honors, have become so lost to every sense of professional propriety, as to proclaim themselves champions of

some exclusive idea, to the disparagement of the regular profession, in the minds of those who are incapable of judging of the truth or falsity of systems of medicine. Such individuals use the title of "doctor" to secure the confidence of intelligent and honest people, whilst they prove recreant to all the moral obligations they are under to maintain the honor and dignity of the doctorate.

These two classes include all who have any valid claim to the title of doctor.

The defective are all those who never had any claim to recognition by the profession. With that effrontery which is engendered by ignorance, they offer advice and promise a cure of any case in the long catalogue of diseases. These are the unprincipled schemers whose fulsome advertisements darken the columns of almost every newspaper in the land, rendering them unfit for distribution through enlightened communities, and not unfrequently fit productions for the notice of those whose duty it should be to enforce the law for the suppression of obscene publications.

The conductors of newspapers, suborned by the profits of this disgraceful business, will tell you in defense of themselves, that "few are deceived by these pretentious and silly advertisements." But this is not so: the human mind is so constituted, that it will give more or less heed to what is asserted with apparent candor, no matter by whom.

Without this mutual trust, society could not exist; hence the abuse of it is a sin against society.

With your permission, I will give a few facts

brought to light in a case at law, which came under my notice more than thirty years ago. It is a good type case in illustration of the prominent features of the whole class. The suit was brought by the proprietors of the patent for the "Vegetable Hygeian Pills" against one Palmer, whom they charged with having damaged their business by the manufacture and sale of a spurious article. It appeared in evidence, that the proprietors had been so prosperous in England, as to establish in London an institution by them grandiloquently christened, "The British College of Health," at an expense of two hundred and fifty thousand dollars, from which they had sent agents into the principal cities of Europe and America; that their sales had been so large in this country alone, as to amount in a single year to the sum of three hundred thousand dollars, and even that this alleged pedlar of spurious pills had sold a hundred thousand boxes before he was arrested. It was also shown, that this "college" had neither charter, professors, nor students, but consisted of a large building with the apparatus for putting up these pills; also, that the proprietors were neither Physicians, Surgeons, nor even men of education, but mere ignorant, boasting quacks. These pills, like others similarly advertised be it remembered, were recommended to cure, and certified to have cured a long list of frightful diseases. Soon, however, after they had been proved to consist only of aloes, cream of tartar, and gamboge, the charm was broken—they were consigned to obliivion.

Were like investigation made of the claims of a large majority of advertised nostrums or advertising quacks, they would share a like fate, and the sufferers who are now deluded into the folly of wasting time and money upon them, instead of seeking early investigation and treatment of their cases at the hands of those who devote their lives to these objects, would be greatly benefited thereby.

For several years past there has been no organization of the medical profession in San Francisco, no society to which properly qualified medical men on taking up their residence here, might apply for recognition as members of the legitimate profession.

A few weeks ago, a gentleman whose qualifications as a regular practitioner no one can question, invited to his residence several members of the profession, to consider the propriety of organizing a Medical Society. Those who responded to that invitation, represented the different nationalities of which the profession is here composed. It was unanimously resolved, "that steps be taken to bring together as large a number of those who are known, or believed to belong to the regular profession here, as possible, for the purpose of forming a society." After two or three preliminary meetings, with increased numbers, it was decided to send a letter of notification to every practitioner in the city believed to be a regular member of the profession. This brought together a sufficient number to divest the meeting of any thing like partizanship, and they forthwith proceeded to

organize under the name of the "San Francisco Medical Society," by adopting a Constitution and By-laws. The Code of Ethics framed, adopted, and recommended by the "American Medical Association," constitutes the basis of our organization, and to this our Constitution and By-laws conform.

This furnishes a platform upon which all who are described as regular physicians or surgeons, can meet upon terms of equality for mutual recognition and conference, whatever the source of their testimonials.

This Society seeks to secure co-operation among the "regular" members of the profession in San Francisco; and if its meetings are conducted in the right spirit, will be productive of mutual improvement by canvassing the results of individual investigation and experience, so that the observations of each may thus be made available for the benefit of all. Organized upon such a basis, with such objects in view, let us not only invite facts and observations, but give a cordial welcome to hypotheses in their interpretation.

Even theories which do not stand the test of criticism, but prove unreliable, are not entirely useless, but should be looked upon often as important steps in the progress of science toward the attainment of truth; because, hypotheses which have been advanced to explain some of the phenomena of nature, have failed to answer the expectations of those who believe in them, and proved mere visions, we are not warranted in discarding theory altogether as only visionary specu-

lation; let us rather regard them as dreams foreshadowing a reality, not as evidence that theories are nothing but dreams. As the mock suns which show for a time so brightly through the mists of the morning, proclaim the influence of the glorious orb of day about to dispel the mists and bless the land with his radiance; so theories have often by their brilliance attracted attention in the direction from which the light of truth is to come.

In conclusion, whilst I assure you of my high appreciation of the honor conferred upon me, and ask in advance your generous indulgence of my short-comings in the discharge of the duties of my office, let me express the hope that all our doings as a Society, may be distinguished for the exercise of such gentlemanly urbanity, as shall make this Society a rallying point for the profession of the Pacific Coast.

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